PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as recorded before of inerteed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicates unless corrected before or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicates and/or (b) indicated unless corrected before or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicated unless corrected before or special regular blocks. Block 1 through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate, all first through 5 should be completed where appropriate appropriate appropriate appropriate appropriate appropriate and 5 should be completed where appropriate appropriate

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03/05/2010

Steven B. Kelber Berenato & White, LLC 6550 Rock Spring Drive

Suite 240 Bethesda, MD 20817 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Feed, Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Signature)
(Due)

 APPLICATION NO.
 FILINO DATE
 FIRST NAMED INVENTOR
 ATTORNEY DOCKET NO.
 CONFIRMATION NO.

 10/053/975
 01/18/2002
 Limin Li
 FUNC-0020-UTI
 5176

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	06/07/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
YAEN, CHRISTOPHER H		1643	530-387100	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.853). Change of correspondence address (or Change of Correspondence Address form FT0/SB/122) attached. "Fee Address' indication (or 'Fee Address' Indication form FT0/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 1 registered patent attorneys (2) the name of a single firm (having as a member a registered durinery or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
			THE PATENT (print or type			
PLEASE NOTE: Un recordation as set for	dess an assignee is ident th in 37 CFR 3.11. Com	ified below, no assignee detion of this form is NC	data will appear on the p T a substitute for filing an	ntent. If an assignee is i assignment.	dentified below, the doc	ument has been filed fo
(A) NAME OF ASSI The Board	GNEE of Trustee:	s of the Le	(B) RESIDENCE: (CITY land	and STATE OR COUNT	•	
	Junior Unive		_	Individual A Corporat		entity Governmen
	are submitted: No small entity discount p	nermitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5 U OF 8 8 (enclose an extra copy of this form).			
a. Applicant clain	atus (from status indicate	is. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMALL EN	TITY status. See 37 CFR	1.27(g)(2).
NOTE: The Issue Fee ar	nd Publication Fee (if req records of the United Sta	nired) will not be accepted	ed from anyone other than t	he applicant; a registered	attorney or agent; or the	assignee or other party

Typed or printed name Steven B. Kelber Registration No. 30,073

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.44. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form audion registration for the confidential thin the confidential of the confidential thin the confidential of the confidential thin thin thin the confidential thin the confidential thin the confidential thin the c

Authorized Signature

Date_March 9, 2010